

COUNTY OF SAN BERNARDINO  
DEPARTMENT OF COMMUNITY DEVELOPMENT AND HOUSING

2009-2010 COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG) PROGRAM

**- PUBLIC SERVICE PROGRAM PROPOSAL -**

Public service programs involve the use of CDBG funds to pay the non-construction costs of providing new or expanded services such as: graffiti removal, social services, transportation services (in support of qualified social services); employment, housing, legal, health and education services; and blight abatement. Please note that federal regulations limit the use of CDBG funds for all public services to 15 percent of the County's annual grant.

**Important:** The U.S. Department of Housing and Urban Development (HUD) notified the County that the costs associated with subrecipient oversight of small grants far exceed the actual grant award. HUD recommended that the County increase the minimum grant awards in order to justify the administrative burden. **Consequently, CDH requires CDBG awards of \$5,000 or more per city or unincorporated community to be served, and will use this grant minimum in making its recommendations for approved projects.** See page 5 for more details.

Carefully read through the instructions and proposal forms. Answer all questions, which are applicable to your project, as specifically and completely as possible. If more space is needed, attach separate sheets. Submit one (1) signed paper copy.

TYPE OR PRINT

**A. APPLICANT INFORMATION**

- 1) Name of Applicant Organization: \_\_\_\_\_  
\_\_\_\_\_
- 2) Mailing Address: \_\_\_\_\_  
\_\_\_\_\_ Zip: \_\_\_\_\_
- 3) Contact Person: \_\_\_\_\_
- 4) Title: \_\_\_\_\_
- 5) Phone: \_\_\_\_\_ FAX: \_\_\_\_\_
- 6) E-mail Address: \_\_\_\_\_
- 7) Organizational History: (This is applicable only if you are a non-profit organization).
  - a. Date Organization founded: \_\_\_\_\_
  - b. Date Organization incorporated as a non-profit organization: \_\_\_\_\_
  - c. Federal identification number: \_\_\_\_\_ State identification number: \_\_\_\_\_
  - d. Number of paid staff: \_\_\_\_\_ Number of volunteers: \_\_\_\_\_
- 8) Is this a "faith-based" organization? \*Yes \_\_\_\_\_ or No \_\_\_\_\_

\*Generally, a faith-based organization was founded or is inspired by faith or religion. Such organizations often choose to demonstrate that faith by carrying out one or more activities that assist persons who are less fortunate.

**B. PROJECT DESCRIPTION**

- 1) Using 25 words or less, provide a concise description of the proposed program. **This 25-word description is required in order for this application to be considered complete.** Consider items addressed under the General Project Eligibility section of the Project Proposal Instructions. A detailed project description is also required to be provided on page 6.

---

---

---

**C. PROJECT CHARACTERISTICS**

- 1) Street address and nearest cross streets of the site or office where the program will be carried out:

---

---

- 2) Legal property owner: \_\_\_\_\_

- 3) What is the current zoning that would affect the program: \_\_\_\_\_

---

- 4) Is a conditional use permit required? Yes \_\_\_ No \_\_\_

If yes, attach a copy of the permit. If no, explain why: \_\_\_\_\_

---

- 5) Describe the community need(s) addressed by this proposal: \_\_\_\_\_

---

---

- 6) Describe the geographic boundaries of the neighborhood, community or area in which clients of the proposed program reside (attach a map if needed):

---

---

- 7) The proposed Community Service would be provided to: (Please check all that apply)

\_\_\_\_\_ Low-and moderate-income  
persons or households  
\_\_\_\_\_ Abused children  
\_\_\_\_\_ Handicapped persons  
\_\_\_\_\_ Illiterate persons

\_\_\_\_\_ Battered spouses  
\_\_\_\_\_ Homeless persons  
\_\_\_\_\_ Migrant farm workers  
\_\_\_\_\_ Elderly persons

## 2009-10 PUBLIC SERVICE PROGRAM PROPOSAL

- 8) Corporate name and non-profit corporation status of the non-profit organization proposed to receive CDBG funds or CDBG funded assets, in order to provide the proposed service (CDBG subrecipients must be incorporated public or private non-profit organizations):

---

---

### D. **PERFORMANCE OUTCOME MEASUREMENT**

The program performance categories listed below are required under the CDBG program by the U.S. Department of Housing and Urban Development (HUD).

- 1) **Project Objective:** Please check the project objective that most accurately describes what you intend to accomplish by carrying out this activity. Please select only one from the following choices:

- |  |   |
|--|---|
| <input type="checkbox"/> 1 Suitable Living Environment | (Activities that benefit communities/families/individuals by addressing issues in their living environment)   |
| <input type="checkbox"/> 2 Decent Housing              | (Housing activities that meet individual family or community needs; should not be used for activities where housing is an element of a larger effort) |
| <input type="checkbox"/> 3 Economic Opportunity        | (Activities related to economic development, commercial revitalization, and job creation)   |

- 2) **Project Outcome:** Please check the proposed project performance measurement outcome that most accurately describes what you intend to accomplish by carrying out this activity. Please select only one from the following choices:

- |   |   |
|---|---|
| <input type="checkbox"/> 1 Availability/<br>Accessibility | (Activities that make services, infrastructure, housing, and shelter available and accessible. Note that accessibility does not only refer to physical barriers)  |
| <input type="checkbox"/> 2 Affordability                  | (Activities that provide affordability in a variety of ways. It can include creation or maintenance of affordable housing, basic infrastructure hookups, or services such as transportation or daycare) |
| <input type="checkbox"/> 3 Sustainability                 | (Activities that promote livable or viable communities and neighborhoods by providing services or by reviving slums or blighted areas)  |

- 3) Estimated unduplicated number of clients/persons projected to be served (e.g. 25 clients, 50 seniors)

---

- 4) Estimated units of service (duplicated, e.g. 25 clients X 10 visits = 250 units of service) \_\_\_\_\_

- 5) Please provide a brief explanation on how your proposal will address the selected program performance category. Describe the anticipated quantifiable results of your proposal for the selected category.

---

---

---

---

# 2009-10 PUBLIC SERVICE PROGRAM PROPOSAL

## E. PROJECT BUDGET

	<u>CDBG Share</u>	<u>Other Source</u>
Personnel	\$ _____	\$ _____
Equipment	\$ _____	\$ _____
Consultant Services	\$ _____	\$ _____
Space Rent	\$ _____	\$ _____
Audits	\$ _____	\$ _____
Other	\$ _____	\$ _____
Total Costs	\$ _____	\$ _____
Grand Total (CDBG + Other)	\$ _____	

Estimator (name and title): \_\_\_\_\_

## F. AMOUNT OF CDBG FUNDS REQUESTED

- 1) Amount of CDBG funds requested in this application: \$ \_\_\_\_\_
- 2) Additional funds to be provided by Other Source(s) for this project. The date that the Other Source(s) of funds have been or will be awarded and available, must be stated below:
 

Source(s): _____	\$ _____
Award Date: _____ Date Available: _____	
Source(s): _____	\$ _____
Award Date: _____ Date Available: _____	
Source(s): _____	\$ _____
Award Date: _____ Date Available: _____	
Total of <b>Other Sources</b> \$ _____	
(Should equal "Total costs, Other Sources" in section E, above)	
- 3) If this project benefits residents of non-participating jurisdictions, have requests been submitted to those other jurisdictions? Yes \_\_\_\_\_ No \_\_\_\_\_

**G. BENEFIT AREAS**

This section requires a break down of the requested CDBG funds according to the geographic area to be covered by the proposed public service. Only enter amounts for communities where you intend to provide primary service. Partial funding of a project proposal may occur and must be considered when calculating a requested amount for more than one area. ***Each requested amount must be \$5,000 or greater and must be sufficient to provide the service within the identified city or unincorporated region.***

- 1) **Cooperating Cities:** The following cities participate as cooperating cities in the County's CDBG program. Please determine if the primary service area for your proposed service would include one or more of the following cities. If the service would provide predominate or partial benefit to city residents, the County will request a funding recommendation from the benefiting city or cities. Enter the requested amount of CDBG funds needed to provide the proposed service to each applicable city. Sub-total your entries below.

	<u>Amount Requested</u>		<u>Amount Requested</u>
Adelanto	\$ _____	Loma Linda	\$ _____
Barstow	\$ _____	Montclair	\$ _____
Big Bear Lake	\$ _____	Needles	\$ _____
Colton	\$ _____	Twentynine Palms	\$ _____
Grand Terrace	\$ _____	Yucaipa	\$ _____
Highland	\$ _____	Town of Yucca Valley	\$ _____

**Funds Benefiting Cooperating Cities:**                      **Sub-total**                      \$ \_\_\_\_\_

- 2) **Unincorporated Regions:** The following regions contain unincorporated areas covered by the County CDBG program. Please determine if the primary service area for your proposed project includes one or more of the following unincorporated areas. Check off the applicable community or communities. Enter the requested amount of CDBG funds needed to provide the proposed project to each applicable unincorporated area. Sub-total your entries below.

	<u>Amount Requested</u>
<input type="checkbox"/> Searles Valley and vicinity (in the First District)	\$ _____
<input type="checkbox"/> Hinkley/Lenwood <input type="checkbox"/> Newberry Springs <input type="checkbox"/> Baker/vicinity (in the First District)	\$ _____
<input type="checkbox"/> Wonder Valley <input type="checkbox"/> Colorado River areas (in the First District)	\$ _____
<input type="checkbox"/> Oro Grande <input type="checkbox"/> other Unincorporated Victor Valley areas (in the First District)	\$ _____
<input type="checkbox"/> Phelan/Pinon Hills <input type="checkbox"/> El Mirage <input type="checkbox"/> Wrightwood/vicinity (in the First District)	\$ _____
<input type="checkbox"/> Lucerne Valley and vicinity (in the First District)	\$ _____
<input type="checkbox"/> Crestline/Cedarpines Park (in the Second District)	\$ _____
<input type="checkbox"/> West Fontana <input type="checkbox"/> Lytle Creek <input type="checkbox"/> Devore (in the Second District)	\$ _____
<input type="checkbox"/> Johnson Valley <input type="checkbox"/> Landers <input type="checkbox"/> Morongo Valley/vicinity (in the Third District)	\$ _____
<input type="checkbox"/> Morongo Basin (in the First and Third District)	\$ _____
<input type="checkbox"/> Joshua Tree and areas to the north and east (in the Third District)	\$ _____
<input type="checkbox"/> Lake Arrowhead <input type="checkbox"/> Running Springs <input type="checkbox"/> Big Bear Valley (in the Third District)	\$ _____
<input type="checkbox"/> Bryn Mawr <input type="checkbox"/> Del Rosa <input type="checkbox"/> Mentone (In the Third District)	\$ _____
<input type="checkbox"/> South Montclair <input type="checkbox"/> Northwest Chino (in the Fourth District)	\$ _____
<input type="checkbox"/> Muscoy <input type="checkbox"/> North Norton <input type="checkbox"/> Bloomington (in the Fifth District)	\$ _____
<input type="checkbox"/> Arrowhead Suburban Farms (in the Fifth District)	\$ _____
Other, Please specify _____	\$ _____
<b>Funds Benefiting Unincorporated Regions:</b> <b>Sub-total</b>	<b>\$ _____</b>

- 3) **Total Funds:** The total amount of CDBG funds requested in Section G, (Cooperating Cities + Unincorporated Regions). This amount must equal the amount of CDBG funds requested in this application on Line 1, in Section F.

**Total Funds Requested**                      \$ \_\_\_\_\_

**DETAILED PROJECT DESCRIPTION**

(Continuation of Section B, Project Description, Page 2)

Within the space provided on this page, provide detailed information needed to fully describe the proposed public service, its purpose and its beneficiaries. Please attach applicable maps, plans and brochures.

Authorized Signature: To the best of my knowledge, the information provided on this application is true and I am authorized to submit this application on behalf of the applicant agency. Also, I acknowledge that insurance coverage including, but not limited to, Comprehensive General Liability and Automobile Liability, and Professional Liability will be required before CDBG funds can be made available to approved projects.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

PLEASE SUBMIT ONE SIGNED PAPER COPY OF EACH COMPLETED AND SIGNED PROJECT PROPOSAL TO: County of San Bernardino, Department of Community Development and Housing, 290 North "D" Street, Sixth Floor, San Bernardino, CA 92415-0040, Attention: Program and Compliance Section.

For assistance or information regarding the completion of this proposal, call (909) 388-0800 or FAX (909) 388-0929.

This application form can be accessed on CDH's Web Page at:  
[http://www.sbcounty.gov/eda/cdh/community\\_dev/cdbg\\_project.asp](http://www.sbcounty.gov/eda/cdh/community_dev/cdbg_project.asp)

comdev/consolidated plan/2009-2010/CDBG Application text/

2009-10 PUBLIC SERVICE PROGRAM PROPOSAL

Attachment A

CDBG Application Checklist

Please include one copy of the following items if they are applicable. If you are not submitting these items at this time please notify the Department of Community Development at (909) 388-0800 to make other arrangements. The following information is required before any contract or reimbursement can be completed.

- \_\_\_\_\_ Summary of agency's current year General Operating Budget;
- \_\_\_\_\_ List of Agency's Board of Directors, including names and addresses;
- \_\_\_\_\_ Articles of Incorporation and Bylaws;
- \_\_\_\_\_ Proof of existing non-profit/tax-exempt status (Letters from the Federal Internal Revenue Service and State Franchise Tax Board);
- \_\_\_\_\_ Applicant's most recently completed financial audit;
- \_\_\_\_\_ Current insurance policy and amounts covered;
- \_\_\_\_\_ Organizational Chart;
- \_\_\_\_\_ Minutes of last Board meeting.